

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>ML</i>		04-05-01
O.I.P.E. CLASSIFIER	<i>JS</i>	32	4/30
FORMALITY REVIEW	<i>AS</i>	535	05-22-01
RESPONSE FORMALITY REVIEW	A. M	JC 580	08-08-01

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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APPLICANTS

TITLE

Claim	Date
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If more than 150 claims or 10 actions  
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Best Available Copy

1003 U.S. PTO  
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